

In The Matter Of:
R.K., et al v.
Governor Bill Lee, et al

M.S.
September 30, 2021



Original File MattDowty MS 093021.txt
Min-U-Script® with Word Index

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1 IN THE UNITED STATES DISTRICT COURT
2 FOR THE MIDDLE DISTRICT OF TENNESSEE

3 _____))
4 R.K., et al,)
5 Plaintiffs,)
6 vs.) No: 3:21-cv-00725
7 GOVERNOR BILL LEE, in his) Chief Judge Crenshaw
8 official capacity as) Magistrate Judge Newbern
9 GOVERNOR OF TENNESSEE,)
10 et al,)
11 Defendants.)
12 _____))

12 THE DEPOSITION OF M.S.
13 September 30, 2021

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23 Lisa J. Blake, LCR, RPR
 LCR #483
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1 The deposition of M.S., taken on behalf of
2 the Defendants, pursuant to Notice, on September 30,
3 2021, beginning at approximately 3:03 p.m., via Zoom
4 platform.

5 This deposition is taken in accordance
6 with the terms and provisions of the Federal Rules
7 of Civil Procedure.

8 All forms and formalities are waived, and
9 objections as to relevancy, materiality, and
10 competency are reserved, to be presented at or
11 before the hearing. Objections as to the form of
12 the question must be made at the time of the taking
13 of the deposition. The signature of the witness is
14 waived.

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1 A P P E A R A N C E S

2

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1	INDEX		1	make sure things run as smoothly as possible.	
2	M.S.	PAGE NO:	2	This is, essentially, my opportunity to	
3	Direct Examination.....	6	3	find out what are the bases for your lawsuit, and	
4	by Mr. Dowty		4	the things that you might testify to in a hearing.	
5			5	And so I'm going to ask you some questions about	
6			6	your -- about the facts underlying the lawsuit. And	
7	EXHIBITS		7	you're obligated to answer those questions	
8	NO.	DESCRIPTION PAGE NO:	8	truthfully.	
9	None.		9	Is that agreeable?	
10			10	A. Understood, and agree.	
11			11	Q. I would ask that you let me finish each	
12			12	question fully before you start to answer. And I'll	
13			13	do my best to afford you the same courtesy. We're	
14			14	on a little bit of a delay, potentially, doing this	
15			15	via video, and so I'm going to try to give a beat	
16			16	after you finish answering before I start my next	
17			17	question. It might make things go a little	
18			18	smoother.	
19			19	Is that fair?	
20			20	A. Sure.	
21			21	Q. If at any point you don't understand a	
22			22	question or would like me to repeat it or rephrase	
23			23	it, just ask me to do that.	
24			24	Will you do that?	
25			25	A. Yes.	
Page 6			Page 8		
1	M.S.,		1	Q. If you answer a question, I will assume you	
2	having first been duly sworn, was examined and		2	understood the question.	
3	testified as follows:		3	Is that fair?	
4	DIRECT EXAMINATION		4	A. Uh-huh.	
5	BY MR. DOWTY:		5	Q. If at any point you need to take a break,	
6	Q. Good afternoon. My name is Matthew Dowty.		6	just let me know. I just ask that if there's a	
7	I represent the governor in this action.		7	question, that you answer the question before we	
8	Before we came on the record we agreed that		8	break.	
9	you would be identified by your initials, as you		9	Is that agreeable?	
10	have been in the court filings.		10	A. Understood. Yes.	
11	A. (Witness nods head up and down.)		11	Q. Your attorney may make objections during	
12	Q. We're here in the lawsuit R.K. versus Lee.		12	the deposition. Unless he directs you -- unless he	
13	And you are a plaintiff in that. Is that		13	states directly that you're not to answer, you're	
14	correct?		14	still obligated to answer the question.	
15	A. Correct.		15	A. (Witness nods head up and down.)	
16	Q. And you're identified as "M.S." in that		16	Q. Is that agreeable?	
17	case?		17	A. Yes.	
18	A. Correct.		18	Q. All right. Is there any reason that you	
19	Q. I'm going to ask you some questions about		19	can't answer these questions fully and honestly	
20	that case today.		20	today?	
21	Have you ever been deposed before?		21	A. No.	
22	A. No, never.		22	Q. Have you taken any medication or any other	
23	Q. I'm going to go over a few basic ground		23	substance that would affect your ability to answer	
24	rules. Your attorney probably went over some of		24	these questions honestly and accurately?	
25	this with you, but I'm just going to go over it to		25	A. No.	

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1 Q. You signed a Declaration that's part of the
2 record in this case. I'm going to share my screen.
3 Can you see the document that's on the
4 screen?
5 A. Yes.
6 Q. I'm going to scroll down. Does this appear
7 to be your Declaration?
8 A. Yes, it does.
9 Q. I'm going to ask you some questions about
10 that.
11 You are the mother of W.S. Is that
12 correct?
13 A. That's correct.
14 Q. I'm going to refer to her by her initials
15 as well.
16 And she has type 1 diabetes?
17 A. That is correct.
18 Q. When was she first diagnosed with type 1
19 diabetes?
20 A. On October 17th of 2020.
21 Q. How did that diagnosis come about?
22 A. We had noticed that she was drinking a lot
23 of water; she was urinating more frequently; she
24 seemed a bit lethargic. And this happened over the
25 course of, you know -- kind of built up, maybe, over

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1 the course of several days.
2 So we took her to my parents' house. My
3 parents live close. And my father has type 1
4 diabetes, so we checked her blood glucose with his
5 glucometer at his house. And we checked -- we did
6 four finger sticks. And every time the glucometer
7 just read "high," meaning that it was too high to
8 read, her blood glucose was too high to read.
9 So we went to an urgent care immediately.
10 And they also checked her finger and it read "high"
11 on their monitor. So then they directed us to go
12 straight to the emergency room, which we did. And
13 from there she was -- you know, they ran multiple
14 tests and concluded that she did have type 1
15 diabetes.
16 Q. I'll stop sharing my screen. Just easier
17 that way.
18 All right. How does the diabetes affect
19 her on a daily basis?
20 A. The diabetes is a constant struggle to, you
21 know, monitor everything that she's eating, monitor
22 her activity, her water intake, the temperature. I
23 mean, there is so many things that can impact her
24 blood glucose just on a daily basis. So, you know,
25 keeping her healthy and in range is, you know, we're

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1 constantly checking her blood glucose.
2 She has a glucose monitor that she wears
3 now, so we get updates on our phone in realtime.
4 So, it's a lot of carb counting. She gets
5 a minimum of four doses via injection of insulin
6 every single day. And it's -- it's a -- it's a
7 tough disease, but she's -- you know, she's been a
8 tough kid and has -- it's been almost a year of her
9 having it now, and we're managing it the best we
10 can. And she's quite responsible and knows how to
11 inject insulin now on her own with adult
12 supervision. And, yeah, she's -- she's -- she's
13 very good and responsible about managing her
14 diabetes.
15 But, as parents, it's -- it's something
16 that never -- it's never not at the forefront of
17 your mind, just thinking about what her levels are,
18 is she dropping too quickly; could she be low, which
19 is immediately dangerous. Could she be too high,
20 which is also dangerous in a little bit longer term.
21 And then, you know, with -- with illness it just
22 brings about a much more complicated layer of
23 managing the disease.
24 Q. Does she have any other chronic conditions
25 that you're aware of?

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1 A. She does not. She does have an inhaler
2 that she was using for potentially asthma, but they
3 never officially diagnosed her. And it was -- the
4 inhaler was only used on an as-needed basis. And we
5 haven't had, really, many issues with it, needing to
6 use it, recently.
7 Q. Okay. When did you first notify her school
8 of her diabetes diagnosis?
9 A. Well, we actually -- I notified her teacher
10 that weekend that she was diagnosed. We were in the
11 hospital, but we were -- we did virtual school last
12 year, so she wasn't ever in the school building.
13 Q. So throughout all of the 2020-2021 school
14 year she was virtual?
15 A. Correct.
16 Q. How did she perform in virtual school?
17 A. Academically, she performed well. Socially
18 and mentally, it was more of a struggle. She -- she
19 really needed the social interaction with the kids.
20 She's a very outgoing and social kid, and she seemed
21 to be a little bored by virtual school. So I think
22 she needed that extra interaction that she would get
23 in the school environment.
24 Q. In paragraph three of your Declaration it
25 says that you've spoken to her physician, who

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1 expressed concerns about her being around unmasked
2 students, teachers, and staff and informed you that
3 she was at a high risk of severe complications if
4 she contracts COVID-19?
5 A. Uh-huh. That's correct.
6 Q. Who was that physician?
7 A. Dr. Datye at Vanderbilt Children's
8 Pediatric Endocrinology Clinic.
9 Q. Could you spell that.
10 A. D-A-T-Y-E.
11 Q. When did he express those concerns?
12 A. It's a she. And --
13 Q. Oh, I'm sorry.
14 A. That's okay. Our last visit with her --
15 I'll have to confirm the date, I don't remember off
16 the top of my head. But it was before school
17 started. And my husband and I expressed concerns
18 that we were fearful about sending her back to
19 school, number one. Our district was not allowing a
20 virtual option anymore, which, you know, given the
21 case count increase, you know, we -- it's something
22 we might have considered.
23 And, number two, the masks were optional in
24 our district at that point. And so we asked our
25 physician, you know, "What do you recommend? We

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1 feel like our hands are tied. How do we keep her
2 safe sending her back to school?"
3 And, you know, she said, "The best thing
4 that can happen is that she wears a mask and
5 everyone around her wears a mask." And that's
6 what I -- she said that's what she was doing for her
7 child and that was -- you know, we didn't have a lot
8 of options at that point but just to practice, you
9 know, good hand sanitizing, hand washing, keep your
10 distance when possible, you know. As much as you
11 can tell that to a 7-year-old, that's what we did.
12 Q. After her diagnosis with diabetes, what
13 sort of precautions did y'all take as a family
14 leading up to her going back to school?
15 A. So we had taken many COVID precautions
16 since, you know -- you know, March of 2020. My
17 parents live close to us, and we see them often.
18 So, you know, at the beginning of the pandemic our
19 primary concern was, you know, let's keep the kids
20 safe and keep my parents safe. And so we really
21 didn't see anybody. We didn't see anybody outside
22 of our family for months. We didn't even see my
23 parents for a few months. We did not go out to
24 stores. We had everything delivered. We did not go
25 to restaurants. This -- I mean, and this was all

Page 15

1 before she was diagnosed.
2 So then, when she was diagnosed, we
3 continued those practices, you know, and -- and
4 stayed as safe as possible.
5 Q. Are y'all still continuing those practices?
6 A. Well, we're sending our children to school.
7 Q. Apart from school?
8 A. My husband and I are still working a
9 hundred percent from home. We're still having
10 groceries delivered most of the time. Yeah, so, I
11 mean, there's certain things, certain behaviors that
12 we've adopted that we are still hanging onto to
13 mitigate our risk, and wearing masks out, you know,
14 whenever we're indoors, in public.
15 Q. As far as things like going out to eat, do
16 y'all go to restaurants?
17 A. Occasionally we go to restaurants. But we
18 try to eat out on patios as much as possible.
19 Q. Which school in the Franklin Special School
20 District does W.S. attend?
21 A. Franklin Elementary.
22 Q. And you said that they don't have a virtual
23 option this year?
24 A. Franklin Special School District is not
25 offering a virtual option this year.

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1 Q. Let me back up.
2 When y'all go out to eat, do you take -- is
3 W.S. with you when you've gone out to eat in
4 restaurants?
5 A. Sometimes. Not always.
6 Q. How frequently would you say that y'all
7 have gone out to eat with her?
8 A. Inside a restaurant? I don't know, maybe
9 once a month, if that.
10 Q. Okay.
11 A. Patios, definitely we try to do patios as
12 much as possible. But, still, we eat most of our
13 meals at home, and sometimes will get curbside
14 delivery, takeout.
15 Q. W.S. has a 504 plan; right?
16 A. That's correct. Uh-huh.
17 Q. Share my screen.
18 Does this appear to be her plan? I'll
19 scroll down. About six pages.
20 A. Yes. Yes.
21 Q. I can slow down or speed up.
22 A. That looks like her plan.
23 Q. When was that put in place?
24 A. A few days before school started, so early
25 August.

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1 Q. This year?

2 A. This year.

3 Q. And how did that come about?

4 A. I contacted the assistant principal at our

5 school, who is the 504 coordinator, and, you know,

6 asked her about getting one set up for W.S. And

7 then we had a meeting with the assistant principal

8 and the nurse.

9 Q. What did y'all discuss in that meeting?

10 A. This was, you know, our first time as a

11 family going through the process of setting up a

12 504, so we came prepared with her health plan from

13 her physician and talked about the expectations that

14 we had and requests that we had for the school and

15 just some, you know, accommodations that we would

16 request that they allow her to make to be able to,

17 you know, be educated and with -- you know, keep her

18 healthy and minimal disruption to her day.

19 Q. What accommodations did you request?

20 A. Mostly it had to do with her diabetes care,

21 with the nurse keeping track, following her glucose

22 monitor on her phone so the nurse always knew what

23 her glucose levels were. Keeping snacks in -- in

24 the gym, the nurse's office, her classroom.

25 Allowing her water and bathroom breaks when she

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1 needs them; allowing her snacks when she needs them;

2 allowing her to keep her cell phone on her at all

3 times, because it is the transmitter, basically, for

4 her -- her glucose monitor.

5 And -- and, you know, there's things like

6 the nurse comes to her at lunch to give her insulin

7 so that she doesn't have to go to the nurse's

8 office. And just basic healthcare things like that.

9 Q. So were there any accommodations -- were

10 there any accommodations that you requested related

11 to COVID?

12 A. We requested to be notified if there were

13 any potential COVID cases in her class so that we

14 could, you know, make the decision to keep her home

15 and to prevent her from contracting COVID.

16 Q. Did you inquire at all about homebound

17 options?

18 A. We did not, because we felt that she would

19 benefit the most academically, socially,

20 emotionally, and the best thing for her mental

21 health was to be in the physical school setting

22 where she would really -- we knew that would be the

23 best place for her. So, no, we did not request any

24 homebound instruction.

25 Q. What are your options if you don't believe

Page 19

1 that the 504 plan is appropriate?

2 A. I -- I never said the 504 plan wasn't

3 appropriate.

4 Q. Well, if you took issue with the 504 plan,

5 if you thought that an accommodation was needed that

6 wasn't provided in the 504 plan, do you have an

7 understanding of the options to pursue a change to

8 that?

9 A. My understanding during our 504 discussions

10 were that, you know, we could revisit the 504 plan

11 as needed, and would definitely revisit it every

12 year before school started. Everything we discussed

13 in our 504 meeting was happily agreed to by the

14 coordinator and the nurse, so we didn't have any

15 issues with the 504.

16 Q. Does she have an individual health plan?

17 A. She has an individual health plan, yes.

18 Q. When was that implemented?

19 A. The individual health plan was requested.

20 We requested it of her physician to provide to the

21 school during the 504 meeting. So that was in

22 August that they provided that to us.

23 Q. And what does that plan provide for?

24 A. That plan gives the nurse specific

25 instructions on her insulin-to-carb ratios, you

Page 20

1 know, her glucose levels and what kind of correction

2 factor she might need. It gives just basic diabetes

3 management information to the nurse directly from

4 the doctor.

5 Q. So she's -- well, when did this school year

6 start?

7 A. It was a Friday in early August. Let me

8 look at my calendar.

9 The first day of school was August 6th.

10 Q. So she attended school in person starting

11 then?

12 A. Correct.

13 Q. And there was no mask requirement at that

14 time?

15 A. There was no mask requirement. It was mask

16 optional. The school district had announced mask

17 optional policy in May of this year, which was

18 concerning to us because knowing how COVID rates can

19 change so quickly, it seems a little premature to be

20 announcing a policy like that for the start of the

21 school year, which was months later.

22 We had signed our kids up for a camp

23 through Franklin Special School District called

24 "Young Scholars." But when they announced the mask

25 optional policy, we pulled them from that program.

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1 Didn't feel that it was a necessary risk to take.
2 Q. When was the camp?
3 A. The camp was in early June.
4 Q. Okay. Do you have a sense of the COVID
5 precautions that were taken in her school to start
6 this school year?
7 A. I -- I don't have a great idea, no. I -- I
8 just know, you know, from the information that W.S.
9 relays to me.
10 Q. Does her IHP plan address COVID at all?
11 A. I -- I don't believe it does, no.
12 Q. And that's a written document like the 504
13 plan?
14 A. Uh-huh. Correct.
15 MR. DOWTY: I don't think we've seen one.
16 MR. ASHBY: You didn't request it. Do you
17 want it?
18 MR. DOWTY: Yeah, if you've got it, if we
19 can get a copy of it, that would be great.
20 MR. ASHBY: Yeah, I'll send it over to you.
21 You guys just -- you'd only asked for 504, I didn't
22 know if you wanted more.
23 MR. DOWTY: Okay. Well, yeah. Yeah, if
24 you've got it, that would be good. Thanks.
25 MR. ASHBY: Yeah, we'll forward it.

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1 Q. (BY MR. DOWTY) So before the Franklin
2 Special School District put in a masking requirement
3 on August 23rd, did W.S. -- or did you have a sense
4 of how many students were wearing masks?
5 A. It seemed like the number fluctuated. I
6 know at the very beginning of the school year, what
7 was -- the information that was related to me from
8 my student was maybe four or five children in the
9 class of around 18 were wearing masks.
10 Q. After the mask requirement was put in
11 place, did that number change?
12 A. It did. It changed, and there was far more
13 masking. Maybe -- maybe all children except one or
14 two started wearing masks inside her -- her
15 classroom. I don't know about other classrooms.
16 Q. Does she stay with the same group of
17 students throughout the day?
18 A. My understanding is that there is, you
19 know, some combination of students, maybe, in
20 physical education class and -- and in -- at recess,
21 maybe the whole grade is together. I'm not sure
22 about other classes. I think for the -- for the
23 most part it's probably just her with her class, but
24 there is some interaction with some other classes.
25 Q. So W.S. tested positive for COVID on

Page 23

1 September 2nd. Is that right?
2 A. That's correct.
3 Q. Is that the first time that she's ever
4 tested positive with COVID?
5 A. That's correct.
6 Q. And in your Declaration you state, "I
7 believe she contracted it by coming into contact
8 with an unmasked student at school or from her
9 sister, who was also in contact with unmasked
10 classmates?"
11 A. Correct.
12 Q. What's the basis for that belief?
13 A. The basis is that my older child, who
14 attends a different school in Franklin Special
15 School District, had been exposed at school. We got
16 contact trace call from the nurse on -- I believe it
17 was -- let me see -- it was August 23rd, I believe.
18 So we were notified -- yeah. She had been exposed
19 to COVID by a child at school on August 19th.
20 We were notified by the school the evening
21 of August 23rd that my older child had to quarantine
22 because she was exposed. And my assumption is that
23 she was exposed to a child who was not wearing a
24 mask, because the new regulations are that if the
25 child with COVID was wearing a mask and the child

Page 24

1 that was exposed was wearing a mask, the child that
2 was exposed would not have to quarantine.
3 So my child was wearing a mask, but she had
4 to quarantine. The school told her that -- so when
5 I notified W.S.'s school that her sister had tested
6 positive, they advised me that she would need to get
7 tested on September 2nd.
8 And we went and had her tested on September
9 2nd, and the test was positive.
10 Q. What is your older child -- what are her
11 initials?
12 A. D.S.
13 Q. Did D.S. test positive for COVID at any
14 point?
15 A. Well, yes. So she -- let's see. She
16 stayed home. And she was allowed to return to
17 school if she had a negative test on August 27th.
18 So we -- we kept her home, we got her tested. The
19 test came back negative. She returned August 27th,
20 and then woke up on August 28th with COVID symptoms.
21 So we conducted an at-home test on her,
22 which was positive. And then we immediately
23 isolated D.S. So D.S. went and lived upstairs. We
24 all started wearing masks in our house -- our house
25 during waking hours.

Page 25	Page 27
<p>1 And then W.S. was having symptoms, but the</p> <p>2 at-home test was negative until we had a PCR test</p> <p>3 done on September 2nd.</p> <p>4 Q. When did you first -- when did you first</p> <p>5 get W.S. tested?</p> <p>6 A. So we had actually tested her with an</p> <p>7 at-home test on August 26, because she woke up with</p> <p>8 a little bit of congestion. And her sister was</p> <p>9 still quarantined at that point. The at-home test</p> <p>10 was negative, so she went back to school</p> <p>11 August 27th. Her sister went back to school</p> <p>12 August 27th, and then her sister tested positive the</p> <p>13 next day.</p> <p>14 Q. I'm sorry if you said this already. So</p> <p>15 W.S. was out of school?</p> <p>16 A. (Witness nods head up and down.)</p> <p>17 Q. Which days was she out of school?</p> <p>18 A. She was out of school on Thursday,</p> <p>19 August 26, because she had woken up with some</p> <p>20 congestion. And because her sister was home, we</p> <p>21 just wanted to play it very cautious. But because</p> <p>22 her at-home test was negative and her sister was</p> <p>23 negative and returned to school, we sent her back to</p> <p>24 school -- we sent W.S. back to school on the 27th.</p> <p>25 But then the next day her sister tested</p>	<p>1 moderate range, and we'd never seen her have ketones</p> <p>2 at this level. We've -- we've checked her ketones,</p> <p>3 you know, regularly throughout her -- since her</p> <p>4 diagnosis. But we've never seen anything like this.</p> <p>5 And we got very worried, because anything higher</p> <p>6 than moderate range can quickly escalate into a</p> <p>7 condition known as diabetic ketoacidosis, which is</p> <p>8 life threatening.</p> <p>9 So we immediately called her physician's</p> <p>10 line and spoke with a nurse. And they advised us,</p> <p>11 you know, if you have to keep monitoring her -- and</p> <p>12 we followed this sick day protocol, which we were</p> <p>13 provided by the physician. And they said if</p> <p>14 there -- if her ketones get any larger than the</p> <p>15 moderate range that they're in right now, you need</p> <p>16 to take her immediately to the emergency room, which</p> <p>17 at the time, and maybe still, we weren't even sure</p> <p>18 if there would be a bed for her in the emergency</p> <p>19 room. So not only are we concerned about her being</p> <p>20 sick, but we're concerned about we may not even have</p> <p>21 a place to take her that can help her.</p> <p>22 And because we were proactive in checking</p> <p>23 her ketones that morning and working for 14 hours</p> <p>24 that day with her to flush out the ketones and</p> <p>25 eventually get her blood sugar back into range, we</p>
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<p>1 positive, so then we kept them both home after that.</p> <p>2 Q. And was the first -- was the next test that</p> <p>3 W.S. took positive?</p> <p>4 A. No. She had another negative test at home.</p> <p>5 On the same day that her sister tested positive at</p> <p>6 home, W.S. tested negative at home. But she</p> <p>7 continued to show some symptoms, so the school</p> <p>8 wanted her to have an official test done on</p> <p>9 September 2nd. So that test is where we received</p> <p>10 the positive result.</p> <p>11 Q. I apologize if you had to repeat some of</p> <p>12 that, I was --</p> <p>13 A. It's okay. It's -- it's confusing.</p> <p>14 Q. Yeah. If I could draw it out, it might</p> <p>15 be easier.</p> <p>16 Okay. So what symptoms did W.S. have</p> <p>17 initially?</p> <p>18 A. Initially, it was congestion and a runny</p> <p>19 nose. And then, on the night of September 5th, her</p> <p>20 blood glucose skyrocketed while she was asleep. And</p> <p>21 this was our main concern about her getting infected</p> <p>22 with COVID is the impact that it has on her</p> <p>23 diabetes. And so our fears kind of, unfortunately,</p> <p>24 came true, because we woke her up early the next</p> <p>25 morning and checked her ketones, which were in the</p>	<p>1 were able to avoid a trip to the emergency room.</p> <p>2 She had insulin every few hours. She drank liters</p> <p>3 upon liters of water. After a few hours and</p> <p>4 speaking with the clinic, because we were able to</p> <p>5 flush her ketones out then we were able to make her</p> <p>6 do a lot of exercise, and eventually that brought</p> <p>7 her blood glucose down into a more reasonable range</p> <p>8 that night.</p> <p>9 But for several days after her glucose</p> <p>10 levels were very hard to manage. So it was a</p> <p>11 constant worry that she could, you know, quickly get</p> <p>12 back into that situation where she's developing</p> <p>13 ketones, and that can lead to DKA.</p> <p>14 Q. I think you said you called a nurse</p> <p>15 practitioner. Is that right? Or was it her</p> <p>16 physician?</p> <p>17 A. It's a physician's emergency line.</p> <p>18 Q. They didn't advise you to go to the</p> <p>19 emergency room?</p> <p>20 A. They said if her ketones got any larger</p> <p>21 then, yes, we would need to go to the emergency</p> <p>22 room.</p> <p>23 Q. Did she have any other symptoms COVID</p> <p>24 related, fever, anything to that effect?</p> <p>25 A. No. Her sister did, but she -- we never</p>

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1 detected a fever over, you know, 99.4.
2 Q. Has she had similar issues at any other
3 time with ketones, with her glucose levels?
4 A. We have noticed, you know, sometimes
5 glucose levels -- they can be hard to predict, but
6 we've never seen anything like this that for no
7 apparent reason she just shot up overnight into the
8 400s. There was nothing that she ate, she had been
9 active that day, it didn't make any sense that she
10 would go up that high. And we --
11 Q. Has she --
12 A. -- we've never seen ketones before.
13 Q. Okay. Has she gone back to school since?
14 A. Yes, she has. I believe -- she was out of
15 school for, I believe, a total of nine school days.
16 She went back to school on September 13th.
17 Q. Is W.S. involved in any extracurricular
18 activities at school?
19 A. She is involved in Girl Scouts at school.
20 Q. Do they meet outside of school hours?
21 A. Yes. They have not had a meeting yet, but
22 the plan is, yeah, it's after school.
23 Q. So she never had a Girl Scouts meeting at
24 this point?
25 A. She was involved in Girl Scouts last year,

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1 and she -- she didn't go to many meetings. She went
2 to a couple that were outside. But she missed most
3 of -- most of the meetings.
4 Q. Is there any activities that she does
5 outside of school, like sports or --
6 A. She -- she participates in acting.
7 Q. Where does she do that?
8 A. Act Too Players in Franklin.
9 Q. Okay. How long has she participated in
10 that?
11 A. Several years, at least. Maybe since she
12 was 4 or 5.
13 Q. Did she continue to do that after her
14 diagnosis with diabetes?
15 A. She did. She participated in -- yes, in
16 the last play that they had. Yeah.
17 Q. What type of COVID precautions were taken?
18 A. They do temperature checks and hand
19 sanitizers before going in. The teachers and the
20 instructors wear masks. And most, if not all, of
21 the children wear masks. But it's -- it's optional.
22 Q. You said "most, if not all."
23 Do you know if all of them do?
24 A. I know in the last class that she was in
25 that it looked like most of the kids did. They did

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1 also have a reduced class size. And this year, I
2 don't know. I don't know what the masking -- I
3 don't know how many have.
4 Q. When was that, the last meeting?
5 A. The last play that they did?
6 Q. Last play.
7 A. It -- their play was in May.
8 MR. DOWTY: Can we take about a 5-minute
9 break? I think I'm almost done, but --
10 MR. ASHBY: Sure.
11 MR. DOWTY: -- want to look over some
12 things.
13 MR. ASHBY: Sounds good.
14 MR. DOWTY: All right. Come back in five
15 minutes. Thanks.
16 THE WITNESS: Okay. Thank you.
17 (Recess.)
18 Q. (BY MR. DOWTY) All right. Yeah, I just
19 have a couple more questions.
20 Well, you said earlier that she went --
21 that W.S. went back to school on September 13th. Is
22 that right?
23 A. That's correct.
24 Q. At what point would you feel comfortable
25 sending her to school with the mask requirements

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1 that are currently in place?
2 A. You mean sending her to school with
3 opt-outs allowed?
4 Q. Yes. I mean, is there a point where COVID
5 numbers would be low enough that you wouldn't worry
6 about it?
7 A. I think, you know, at the point where the
8 CDC and the American Academy of Pediatrics don't
9 think that it's necessary to have universal masking,
10 maybe at that point. I think just following the
11 science and listening to guidelines is what we've
12 been doing, as our family. I would expect the
13 schools to do the same.
14 Q. Are you vaccinated?
15 A. For COVID, yes, I'm vaccinated. Yep.
16 Q. All right. Is your husband vaccinated for
17 COVID?
18 A. He is vaccinated for COVID.
19 Q. Your oldest daughter, D.S., is she eligible
20 for vaccination?
21 A. She is not old enough to be vaccinated.
22 But we plan to get her and her sister vaccinated as
23 soon as we are allowed, as advised by their
24 physicians.
25 Q. All right. Schools of Tennessee can offer

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1 individual virtual options.
2 Have you requested that?
3 A. We have not requested that, because, as I
4 mentioned, although W.S. did well academically, she
5 was bored. She needed more challenge, she needed
6 social interaction. And, mentally, I think she
7 was -- she was really struggling with the isolation
8 of being at home and not around her peers.
9 So I think, you know, what's best for her
10 is being in a healthy school environment, that takes
11 precautions to prevent kids from getting COVID,
12 especially protecting vulnerable children. A simple
13 act of kindness of wearing a mask.
14 It was done last year without much
15 complaints, as far as I can tell. And, you know,
16 I'm not sure why things have changed so much this
17 year.
18 MR. DOWTY: I think that's everything I've
19 got.
20 Bryce, I don't know if you have any
21 questions or anybody else on the call. Any other
22 party?
23 MR. ASHBY: Yeah, I'll save mine for court.
24 MS. KING: No questions, Williamson County
25 Board of Education.

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1 MR. ASHBY: All right. Guess that's it.
2 AND FURTHER DEPONENT SAITH NOT
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1 (WHEREUPON the proceedings concluded at
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